

Court: _____

Cash Change Fund Assignment Log

Custodian: _____

Total Fund: _____

#	Employee's Name (Print)	Employee's Signature	Date Cash Change Fund Portion Received by Employee	Date Cash Change Fund Portion Returned	Amount of Cash Change Fund Assigned
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

Total Cash Change Fund:

Receipt of Cash Change Fund portion: By signing this log, I acknowledge responsibility to count this fund during the daily cash count and close-out of my cash drawer to ensure the fund is intact. I understand that I cannot make change from my cash drawer for another clerk, nor allow another clerk to access my cash drawer to make change. Any change to a Cash Change Fund portion must be obtained from the Cash Change Custodian.